

Viral Hepatitis C in North Carolina, 2018



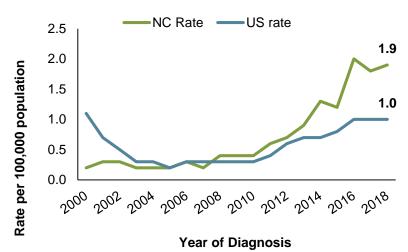
Acute hepatitis C rates are increasing in North Carolina.

Acute Hepatitis C

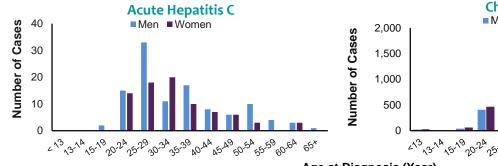
- There were 191 newly diagnosed acute hepatitis C cases in 2018, a fivefold increase from 2007.
- Between 70-85% of acute infections will progress to a chronic infection.

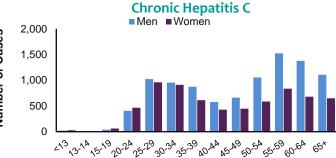
Chronic Hepatitis C

- It is estimated that between 110,000-150,000 North Carolinians are infected with chronic hepatitis C.
- As of 12/31/2018, there were 41,096 reported cases of chronic hepatitis C.



The majority of people newly infected with acute hepatitis C are young.



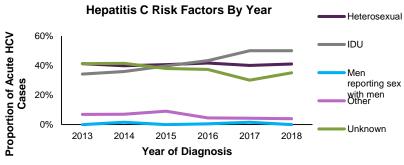


Age at Diagnosis (Year)

- The majority of acute hepatitis C occurred within the 20-39 age group (rate: 20.0 per 100,000).
- Both young people and older people can have chronic hepatitis C. The high case numbers among young people for both acute and chronic hepatitis C mean that hepatitis C is currently spreading among younger people.

Injecting drug use is a growing risk factor for hepatitis C.

- The rise of injecting drug use (IDU) has been a growing risk factor for hepatitis C.
 In 2018, IDU was reported by 50% of people diagnosed with acute hepatitis C.
- This chart reflects self-reported data. It is likely that "heterosexual," while true for the patient, is not the transmission route for the virus. These data likely reflect under-reporting of higher-risk exposures such as injecting drug use.



People may report more than one risk. Other risk includes: healthcare exposure, contact with an individual who is HCV positive.



Viral Hepatitis C in North Carolina, 2018



Hepatitis C Causes and Symptoms

Hepatitis C virus infection symptoms occur 2-12 weeks after exposure in about 20% to 30% percent of newly exposed persons. They can include fever, abdominal pain, loss of appetite, nausea, vomiting, fatigue, jaundice and dark urine.

Hepatitis C is a liver disease caused by the hepatitis C virus (HCV). The acute form of the infection is a short-term illness that occurs within the first six months after someone is exposed to the virus.

For most people (75%-85% of infected persons), acute infection leads to lifelong (chronic) HCV infection, which can result in severe liver disease, liver damage, liver cancer and even death.

Persons with hepatitis C should be vaccinated against hepatitis A and B.



https://hepatitisfoundation.org/HEPATITIS/Hepatitis-C.html.

How is it transmitted?

- Hepatitis C is spread when blood from an infected person enters the body of another person.
- Reinfection of hepatitis C is possible.
- Hepatitis C transmission can occur through sharing needles or "works" when injecting drugs, or through an occupational needle-stick exposure.

Who is at risk?

- People who use drugs whether currently or in the past
- Sexual partners of drug users
- People who had blood transfusions, blood products, or organ donations before July 1992
- People who received clotting factors before 1987
- People who are HIV positive
- People who have a history of incarceration
- People born between the years of 1945-1965
- Children born to HCV-positive mothers

Prevention and Treatment

- There is no vaccine to prevent HCV infection, but there is a <u>CURE</u>.
- Prescribing providers are able to treat for HCV To learn more about the North Carolina Academic Mentorship Program (CHAMP) (https://epi.dph.ncdhhs.gov/cd/hepatitis/CHAMP-Brochure_FINAL-WEB.pdf).
- Major insurers and patient assistance programs can pay for HCV treatment. Ask your medical provider for more
 information. If you are HIV-positive, the HIV Medication Assistance Program (HMAP) could help
 (https://epi.publichealth.nc.gov/cd/hiv/hmap.html).
- Risk-based testing for hepatitis C is available through all local health departments at no cost.
- People with hepatitis C infection should NOT be excluded from work, school, child care, play, sports or other settings based on their hepatitis C infection status as hepatitis C is NOT spread through casual contact.
- Never share drug use equipment; instead, utilize syringe access programs, and clean surfaces with 10% bleach solution.
- The North Carolina Viral Hepatitis Program (NC Division of Public Health) created a regional drug user health resource guide. This guide includes information on low cost/free clinics, housing, food pantry and community resources, hepatitis treatment providers, and syringe access programs. The guide is available online: https://epi.dph.ncdhhs.gov/cd/hepatitis/DrugUserHealthResourceGuide-WEB.pdf.
- The North Carolina Harm Reduction Coalition (http://www.nchrc.org/) provides harm reduction materials to syringe access programs and community-based organizations to prevent transmission of hepatitis C.
- Injury and Violence Prevention Branch (NC Division of Public Health) oversees the North Carolina Safer Syringe Initiative. For more information: https://www.ncdhhs.gov/divisions/public-health/north-carolina-safer-syringe-initiative.

Data Sources: North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of June 1, 2019), enhanced HIV/AIDS Reporting System (eHARS) (data as of June 26, 2019), Surveillance for Viral Hepatitis, United States, 2000-2016 CDC reports (https://www.cdc.gov/hepatitis/statistics/index.htm) and CDC DVH Quarter 5 Hepatitis Reports (June 2019).